AMENDMENT TRANSMITTAL LETTER					Docket No. 341148004US2	
Application No.		Filing Date		Examiner		Art Uni
10/722,015-Conf. #7001		November 25, 2003		M. T. Rozanski 376		3768
licant(s): Dim	mer et al.					
ention: GUIDE	D RADIATION	THERAPY SY	/STEM			
		THE COMMI				
				ed application.		
e fee has been	calculated an					
	Claims	GLAIM Highest	S AS AMENI	DED		
	Remaining After Amendment	Number Previously Paid	Number Extra Claims Present	Rate		
Total Claims	10	- 26 =		x		
ndependent Claims	7	- 14 =		x		
Multiple Depend	ent Claims (ch	eck if applicabl	le)			
Other fee (please specify): Extension for response within third month; Statutory Disclaimer					525.00 130.00	
TOTAL ADDIT	ONAL FEE FO	OR THIS AME	NDMENT:			655.00
Large Entity				x Small Entity		
No additiona	I fee is require	d for this ame	ndment.			
	ge Deposit Acc			n the amount of \$		·
X The amount	of \$	655.00	to cover	the fee is being pai	id via EF1	Account.
Payment by	credit card. Fe	orm PTO-2038	is attached.			
The Director		norized to char	ge and credit	Deposit Account N	lo50	-0665
x Credit a	ny overpaymen	nt.				
x Charge a	any additional fil	ing or application	on processing	fees required under	37 CFR 1.	16 and 1.17
Susan D. Berck Attorney/Agent		98		Dated:	October	19, 2007
PERKINS COIE P.O. Box 1247 Seattle, Washir	ELLP ngton 98111-1					
(206) 359-8000						